

DEC 19 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:

Rice

Application No.: 09/759,425

Filed: January 12, 2001

For: SPREAD SPECTRUM  
ELECTROMAGNETIC SIGNALS

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Art Unit: 3621

Examiner: Cangialosi, S. A.

AMENDMENT

COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Please enter the following amendment and consider the following remarks.

Amendments to the claims begin on page 2.

Remarks begin on page 10.

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Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL**  
**For FY 2005**

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 1,350.00

**Complete if Known**

Application Number 09/759,425  
Filing Date 1/12/2001  
First Named Inventor Bart F. Rice  
Examiner Name Cangialosi, S.A.  
Art Unit 2661  
Attorney Docket No. 012.P1009

**METHOD OF PAYMENT (check all that apply)**

- ☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_
- ☒ Deposit Account Deposit Account Number: 50-3703 Deposit Account Name: Berkeley Law Group
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**FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES           |          | SEARCH FEES           |          | EXAMINATION FEES      |          | Fees Paid (\$) |
|------------------|-----------------------|----------|-----------------------|----------|-----------------------|----------|----------------|
|                  | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) |                |
| Utility          | 300                   | 150      | 500                   | 250      | 200                   | 100      |                |
| Design           | 200                   | 100      | 100                   | 50       | 130                   | 65       |                |
| Plant            | 200                   | 100      | 300                   | 150      | 160                   | 80       |                |
| Reissue          | 300                   | 150      | 500                   | 250      | 600                   | 300      |                |
| Provisional      | 200                   | 100      | 0                     | 0        | 0                     | 0        |                |

**2. EXCESS CLAIM FEES**

**Fee Description**

Each claim over 20 (including Reissues)

Small Entity Fee (\$)

50

Each independent claim over 3 (including Reissues)

200

Multiple dependent claims

360

**Total Claims**

**Extra Claims**

**Fee (\$)**

**Fee Paid (\$)**

58 - 20 or HP = 19 x 50 = 950

HP = highest number of total claims paid for, if greater than 20.

**Indep. Claims**

**Extra Claims**

**Fee (\$)**

**Fee Paid (\$)**

6 - 3 or HP = 2 x 200 = 400

HP = highest number of independent claims paid for, if greater than 3.

**Multiple Dependent Claims**

**Fee (\$)**

**Fee Paid (\$)**

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

**Total Sheets**

**Extra Sheets**

**Number of each additional 50 or fraction thereof**

**Fee (\$)**

**Fee Paid (\$)**

100 - 100 = 0 / 50 = 0 (round up to a whole number) x = 0

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

**Fees Paid (\$)**

Other (e.g., late filing surcharge):

**SUBMITTED BY**

Signature *Howard A. Skalist* Registration No. 36,008 Telephone 503.439.6500  
Name (Print/Type) Howard A. Skalist Date 12/19/05

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (12-04V2)

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|   |  |                                 |                     |           |
|---|--|---------------------------------|---------------------|-----------|
| <p>Effective on 12/09/2004.<br/>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4918).</p> <h2 style="text-align: center;">FEE TRANSMITTAL</h2> <h3 style="text-align: center;">For FY 2005</h3> |  | <p><b>Complete if Known</b></p> |                     |           |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27  |  | Application Number              | 09/759,425          |           |
|   |  | Filing Date                     | 1/12/2001           |           |
|   |  | First Named Inventor            | Bart F. Rice        |           |
|   |  | Examiner Name                   | Cangialosi, S.A.    |           |
|   |  | Art Unit                        | 2661                |           |
| TOTAL AMOUNT OF PAYMENT (\$)  |  | 1,350.00                        | Attorney Docket No. | 012.P1009 |

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 ☐ Money Order 
 ☐ None 
 ☐ Other (please identify): \_\_\_\_\_

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☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 
 ☒ Credit any overpayments

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|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
|                  | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)         | Small Entity Fee (\$) |                |
| Utility          | 300         | 150                   | 500         | 250                   | 200              | 100                   |                |
| Design           | 200         | 100                   | 100         | 50                    | 130              | 65                    |                |
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**2. EXCESS CLAIM FEES**

**Fee Description**

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Each independent claim over 3 (including Reissues)

Multiple dependent claims

| Total Claims | Extra Claims    | Fee (\$) | Fee Paid (\$) |
|--------------|-----------------|----------|---------------|
| 58           | - 20 or HP = 19 | x 50     | = 950         |

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| Indep. Claims | Extra Claims  | Fee (\$) | Fee Paid (\$) |
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| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|--|----------|---------------|
| - 100 =      | / 50 =       | (round up to a whole number) x                   | =        |               |

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge):

|                     |                        |                  |                      |
|---------------------|------------------------|------------------|----------------------|
| <b>SUBMITTED BY</b> |                        | Registration No. | Telephone            |
| Signature           | <u>Howard A. Skalt</u> | 36,008           | 503.439.6500         |
| Name (Print/Type)   | Howard A. Skalt        | (Attorney/Agent) | Date <u>12/19/05</u> |

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